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| PHA 5-Year and Annual Plan | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | OMB No. 2577-0226 Expires 4/30/2011 |
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|------------|---|----------|--------------------------------------|-------------------------------|--|
| 1.0 | PHA Information PHA Name: <u>PONCHATOULA HOUSING AUTHORITY</u> PHA Code: <u>LA075</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/2010</u> | | | | |
| 2.0 | Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>110</u> Number of HCV units: <u>60</u> | | | | |
| 3.0 | Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only | | | | |
| 4.0 | PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.) | | | | |
| | Participating PHAs | PHA Code | Program(s) Included in the Consortia | Programs Not in the Consortia | No. of Units in Each Program PH HCV |
| | PHA 1: | | | | |
| | PHA 2: | | | | |
| | PHA 3: | | | | |
| 5.0 | 5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update. | | | | |
| 5.1 | Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The mission of the Ponchatoula Housing Authority is to provide decent, safe, sanitary and affordable housing to low-income and extremely low-income families. | | | | |
| 5.2 | Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. SEE ATTACHMENT I | | | | |
| 6.0 | PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (a) (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. (A) No revisions made. (b) The Public may obtain copies of the 5 Year Plan and The 2010 Annual Plan and supporting documents at the main administrative office located at 1005 Pelican Drive. Ponchatoula, LA 70454. | | | | |
| 7.0 | Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable. Does not apply. | | | | |
| 8.0 | Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. | | | | |
| 8.1 | Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. The 2010 Annual Plan, 2009 Stimulus (ARRA) Performance & Evaluation Report, 2009 Performance & Evaluation Report and 2007 Performance & Evaluation Report are attached. | | | | |
| 8.2 | Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See Attachment II the CFP 5-YEAR PLAN. | | | | |
| 8.3 | Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. Does not apply. | | | | |
| 9.0 | Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. See Attachment III | | | | |

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| 9.1 | Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. See attached Board Resolution –Attachment IV |
| 10.0 | Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. See Attachment V. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification". Does not apply. |
| 11.0 | Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) |

11.0

- A. HUD FORM 50077- -ATTACHED
- B. HUD FORM 50070—ATTACHED
- C. HUD FORM 50071 - ATTACHED
- D. FORM SL-LLL-ATTACHED
- E. FORM SL-LLL - NOT ATTACHED
- F. RESIDENT ADVISORY BOARD

a. THE RESIDENT ADVISORY BOARD (RAB) MET ON MARCH 9, 2010.

b. THE RAB HAD NO COMMENTS.

G. NO ELEMENTS OF THE AGENCY PLAN WERE CHALLENGED. THE PUBLIC MEETING WAS HELD ON APRIL 8, 2010 AT 10:00AM. NO ONE ATTENDED. THEREFORE, NO PUBLIC COMMENTS WERE MADE.

H. HUD FORM 50075.1 – ATTACHED YEARS 2007, 2009, 2009-S

I. HUD FORM 50075.2—ATTACHED VI

Ponchatoula Housing Authority's Mission Statement

The Ponchatoula Housing Authority's mission is to assist low-income and extremely low-income families throughout the Ponchatoula area to obtain decent, safe, sanitary and affordable housing, particularly in areas where there are no concentrations of poverty; stabilize families in suitable housing so that they may become more economically self-sufficient; upgrade and revitalize the existing public housing units; and collaborate with other governmental units, community-based agencies and corporations to make efficient use of public resources.

Capital Fund Program—Five-Year Action Plan

ATTACHMENT II

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part I: Summary

| PHA Name/Number Ponchatoula Housing Authority/LA075 | | Locality (City/County & State) Ponchatoula/Tangipahoa, LA | | <input checked="" type="checkbox"/> Original 5-Year Plan | <input type="checkbox"/> Revision No: |
|--|---------------------------------------|--|--|--|--|
| Development Number and Name | Work Statement for Year 1 FFY 2010 | Work Statement for Year 2 FFY: 2011 | Work Statement for Year 3 FFY: 2012 | Work Statement for Year 4 FFY: 2013 | Work Statement for Year 5 FFY: 2014 |
| A. LA075-001 Lakeside, Pelican, Circle 8 and Shamrock Square | | | | | |
| B. Physical Improvements Subtotal | | \$24,000.00 | \$16,000.00 | | 90,000.00 |
| C. Management Improvements | | 4,000.00 | 4,000.00 | 7,500.00 | 7,500.00 |
| D. PHA-Wide Non-dwelling Structures and Equipment | | 31,500.00 | 45,000.00 | 150,000.00 | 60,000.00 |
| E. Administration | | 12,000.00 | 12,000.00 | 6,000.00 | 6,000.00 |
| F. Other | | 11,000.00 | 19,500.00 | 4,000.00 | 4,000.00 |
| G. Operations | | 5,000.00 | 5,000.00 | 3,100.00 | 3,100.00 |
| H. Demolition | | | | | |
| I. Development | | 83,100.00 | 69,100.00 | | |
| J. Capital Fund Financing – Debt Service | | | | | |
| K. Total CFP Funds | | | | | |
| L. Total Non-CFP Funds | | | | | |
| M. Grand Total | | 170,600.00 | 170,600.00 | 170,600.00 | 170,600.00 |

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2001**

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Part II: Supporting Pages – Physical Needs Work Statement(s)

| Work Statement for Year 1 FFY 2010 | Work Statement for Year 2011 | | | Work Statement for Year 2012 | | |
|------------------------------------|---|----------|----------------|---|----------|----------------|
| | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost |
| | 75-001/LAKESIDE CIRCLE | | | LA075-001/PHA WIDE | | |
| | Security Fences/Cameras | 3 | 10,000.00 | Construct a Community Center | 1 | 101,360.00 |
| | 75-001/Shamrock Square | | | 75-001/OFFICE | | |
| | Restructure Parking Lot | 1 | 14,000.00 | Landscaping/ Beautification (plant Flowers) | 1 | 1,000.00 |
| | LA075-001/Lakeside & Pelican Drive | | | Purchase furniture for Community Center | | 5,000.00 |
| | Install showers in units | 88 | 97,100.00 | | | |
| | | | | | | |
| | LA075-001 | | | LA075-001/PHA WIDE | | |
| | PHA WIDE/Electrical Repairs | | 9,000.00 | Replace outside a/c units (as needed) | ? | 39,240.00 |
| | | | | | | |
| | LA075-001/PHA WIDE | | | LA075-001 | | |
| | Replace Refrigerators and Ranges | 110 | 17,500.00 | Install security monitoring system in office, community room & Youth center | 3 | 10,000.00 |
| | | | | | | |
| | Subtotal of Estimated Cost | | \$147,600.00 | Subtotal of Estimated Cost | | \$156,600.00 |

Part II: Supporting Pages – Physical Needs Work Statement(s)

| Supporting Pages – Physical Needs Work Statement(s) | | | | | | |
|---|---|----------|----------------|---|----------|----------------|
| Work Statement for Year 1 FFY 2010 | Work Statement for Year 2013 FFY | | | Work Statement for Year: 2014 FFY | | |
| | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost |
| See attached for details | 75-001/PHA WIDE | | | 75-001/PHA WIDE | | |
| | Construct a Youth Center (PHASE I) | 1 | 150,000.00 | Construct a Youth Center (PHASE II) | 1 | 60,000.00 |
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| | | | | La075-001/Pelican Drive | | |
| | | | | Replace Floors & Doors | 12 | 90,000.00 |
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**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2001**

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Part III: Supporting Pages – Management Needs Work Statement(s)

| Work Statement for Year 1 FFY | Work Statement for Year 2013 FFY | | Work Statement for Year 2014 FFY | |
|-------------------------------|---|----------------|---|----------------|
| | Development Number/Name General Description of Major Work Categories | Estimated Cost | Development Number/Name General Description of Major Work Categories | Estimated Cost |
| | LA075-001/PHA WIDE MANAGEMENT IMPROVEMENTS | | LA075-001/PHA WIDE MANAGEMENT IMPROVEMENTS | |
| | Staff Trainings, Software Upgrades & Travel | 7,500.00 | Staff Trainings, Software Upgrades & Travel | 7,500.00 |
| | Administration | | Administration | |
| | Administration salaries, Employee benefits | 6,000.00 | Administration salaries, Employee benefits | 6,000.00 |
| | Operations | 3,100.00 | Operations | 3,100.00 |
| | Youth center & community center Supplies | 4,000.00 | Youth center & community center Supplies | 4,000.00 |
| | | | And activities | |
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| | Subtotal of Estimated Cost | \$20,600.00 | Subtotal of Estimated Cost | \$20,600.00 |

Statement of Housing Needs

The Ponchatoula Housing Authority (PHA) continues to carry out its mission of assisting low income families and extremely low-income families, including elderly families, families with disabilities and households of various races and ethnic backgrounds to obtain suitable affordable housing to help families become more economically self-sufficient. The PHA provides one hundred and seventy (170) low-income housing families with rental assistance subsidies and low income housing through local, state and federal programs. Successful program design and implementation has resulted in efficient use of resources and effective collaborations among social service agencies and local units of government. The PHA has maintained a high performer SEMAP score since 2004.

In order to expand the choice and supply of affordable housing, the PHA has implemented a number of strategies that include maximizing its regulatory authority by providing competitive payment standards, developing targeted marketing programs to increase landlord participation and renovating public housing units to substantiate decent housing. The PHA partners with the local police department to ensure safety of all residents.

The PHA continues to take steps to maintain and improve the quality of assisted housing by creating a supportive environment for PHA staff, program participants and landlords to discuss and resolve issues of mutual concern. Through the ongoing work of the PHA's staff, assisted units are regularly inspected and necessary repairs communicated to landlords and maintenance staff in order to maintain safe and suitable housing for program participants.

In order to provide opportunities for an improved living environment for the Section 8 Housing Program participants and increase program budget, the PHA encourages deconcentration of low income housing throughout the area.

The PHA has 110 public housing units ranging from 1BR to 4BR units. The Section 8 Housing Program has 60 vouchers. This allows our agency to have a very wide range of housing choices from all waiting lists based on unit size and availability.

The PHA continues to ensure equal access and equal opportunity in housing through the administration of all PHA programs. The PHA promotes fair housing in the public, private and non-profit sectors, as well as short and long-term solutions to help address these issues.

Ponchatoula Housing Authority's Mission & Goals

The Ponchatoula Housing Authority's mission is to assist low-income and extremely low-income families throughout the Ponchatoula area to obtain decent, safe, sanitary and affordable housing, particularly in areas where there are no concentrations of poverty; stabilize families in suitable housing so that they may become more economically self-sufficient; upgrade and revitalize the existing public housing units; and collaborate with other governmental units, community-based agencies and corporations to make efficient use of public resources.

The PHA has worked progressively to improve the quality of life for the current tenants and incoming tenants we serve. We will create a new community room, Youth center to empower education and free children from being home alone in the afternoons. The PHA has replaced roofs, sewer lines and will replace existing appliances with energy star appliances for more cost efficient electric bills.

**PHA Certifications of Compliance
with PHA Plans and Related
Regulations**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ☒ 5-Year and/or ☒ Annual PHA Plan for the PHA fiscal year beginning 7/2010, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
- ~~17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.~~
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Housing Authority of Ponchatoula
PHA Name

LA075
PHA Number/HA Code

☒ 5-Year PHA Plan for Fiscal Years 20 10 - 20 14

☒ Annual PHA Plan for Fiscal Years 20 10 - 20 11

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

| | |
|-----------------------------|---------------------------|
| Name of Authorized Official | Title |
| <u>Wanda Jones Wells</u> | <u>Executive Director</u> |
| Signature | Date |
| <u>WJWells</u> | <u>04/3/2010</u> |

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Civil Rights Certification**Annual Certification and Board Resolution**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Housing Authority of Ponchatoula

LA075

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

L. R. Kluka

Title

Chairman of Board of Commissioners

Signature

L. R. Kluka

Date

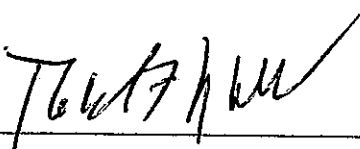
04/03/2010

**Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan**

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011**

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, Robert "Bob" Zabbia the Mayor, City of Ponchatoula certify that the Five Year and Annual PHA Plan of the Housing Authority of Ponchatoula is consistent with the Consolidated Plan of Ponchatoula, Tangipahoa, Louisiana prepared pursuant to 24 CFR Part 91.

 4/13/10

Signed / Dated by Appropriate State or Local Official

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

Housing Authority of Ponchatoula

Program/Activity Receiving Federal Grant Funding

2010 Capital Fund Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Wanda Jones Wells

Title

Executive Director

Signature

X 

Date

04/03/2010

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Applicant Name

Housing Authority of Ponchatoula

Program/Activity Receiving Federal Grant Funding

2010 Capital Fund Program

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

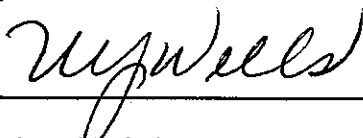
Name of Authorized Official

Wanda Jones Wells

Title

Executive Director

Signature



Date (mm/dd/yyyy)

04/03/2010

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

| | | | | | |
|--|--|--|---|---|--|
| 1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance | | 2. Status of Federal Action: <input checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award | | 3. Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____ | |
| 4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____ if known: _____ Congressional District, if known: 4c | | | 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known: _____ | | |
| 6. Federal Department/Agency: U.S. Department of Housing and Urban Development | | | 7. Federal Program Name/Description: 2010 Capital Fund Program (CFP) CFDA Number, if applicable: _____ | | |
| 8. Federal Action Number, if known: | | | 9. Award Amount, if known: \$ _____ | | |
| 10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): | | | b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): | | |
| 11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. | | | Signature: <u>Wanda Jones Wells</u> Print Name: <u>Wanda Jones Wells</u> Title: <u>Executive Director</u> Telephone No.: <u>985-386-3257</u> Date: <u>04/03/2010</u> | | |
| Federal Use Only: | | | Authorized for Local Reproduction Standard Form LLL (Rev. 7-97) | | |

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

| | | | | | | | |
|--|--|---|-----------------------------|--|------------------|--|-----------------|
| Part I: Summary | | PHA Name: Ponchatoula Housing Authority | | Grant Type and Number Capital Fund Program Grant No: LA48S075501-09 Replacement Housing Factor Grant No: Date of CFFP: | | FY of Grant: 2009-S FY of Grant Approval: | |
| <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 0 | | <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no.2) <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line | Summary by Development Account | Original | Total Estimated Cost | Revised² | Obligated | Total Actual Cost¹ | Expended |
| 1 | Total non-CFP Funds | | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | | | |
| 3 | 1408 Management Improvements | 20,095.00 | | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 20,095.00 | | | | | |
| 5 | 1411 Audit | | | | | | |
| 6 | 1415 Liquidated Damages | | | | | | |
| 7 | 1430 Fees and Costs | 12,500.00 | | 14,020.00 | 14,020.00 | 10,000.00 | |
| 8 | 1440 Site Acquisition | | | | | | |
| 9 | 1450 Site Improvement | | | | | | |
| 10 | 1460 Dwelling Structures | | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 148,267.00 | | 186,937.00 | 186,937.00 | 136,677.50. | |
| 12 | 1470 Non-dwelling Structures | | | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | | | |
| 14 | 1485 Demolition | | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | | |

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF Funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name:
Ponchatoula
Housing Authority

Grant Type and Number
Capital Fund Program Grant No: LA48S075501-09
Replacement Housing Factor Grant No:
Date of CFFP:

FFY of Grant: 2009-S
FFY of Grant Approval:

Type of Grant

☐ Original Annual Statement

☐ Reserve for Disasters/Emergencies

☒ Revised Annual Statement (revision no: 2)

☒ Performance and Evaluation Report for Period Ending: 03/17/2010

☐ Final Performance and Evaluation Report

| Line | Summary by Development Account | Original | Total Estimated Cost | Revised ² | Obligated | Total Actual Cost ¹ | Expended |
|---------------------------------|--|-----------------|----------------------|--------------------------------------|------------|--------------------------------|----------|
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | | | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | | | | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | | 200,957.00 | 200,957.00 | 200,957.00 | 146,677.50 | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | | | |
| Signature of Executive Director | | Date 04/08/2010 | | Signature of Public Housing Director | | Date | |

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Federal FY of Grant: 2009-S[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

| | | | | | | | |
|---|--|--|-----------------------------|---|------------------|---|-----------------|
| Part I: Summary | | PHA Name: Ponchartroula Housing Authority | | Grant Type and Number Capital Fund Program Grant No: LA048P075501-09 Replacement Housing Factor Grant No: Date of CFFP: | | FY of Grant: 2009 FY of Grant Approval: | |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | | | <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:2) <input type="checkbox"/> Final Performance and Evaluation Report | | | |
| Line | Summary by Development Account | Original | Total Estimated Cost | Revised² | Obligated | Total Actual Cost¹ | Expended |
| 1 | Total non-CFF Funds | | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | 15,000.00 | 12,000.00 | | 12,000.00 | | |
| 3 | 1408 Management Improvements | | | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | 3000.00 | | 3000.00 | 2,455.12 | |
| 5 | 1411 Audit | | | | | | |
| 6 | 1415 Liquidated Damages | | | | | | |
| 7 | 1430 Fees and Costs | | 12,000 | | 12,000.00 | | |
| 8 | 1440 Site Acquisition | | | | | | |
| 9 | 1450 Site Improvement | | | | | | |
| 10 | 1460 Dwelling Structures | 6,000.00 | 6,000.00 | | 6,000.00 | 3,285.00 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | | |
| 12 | 1470 Non-dwelling Structures | | 137,600 | | 137,600 | | |
| 13 | 1475 Non-dwelling Equipment | | | | | | 4,750.00 |
| 14 | 1485 Demolition | | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | | |

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFF Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

| | | | | | | | |
|---|--|---|----------------------|--------------------------------------|-----------|--|--|
| Part I: Summary | | | | | | FFY of Grant: 2009 FFY of Grant Approval: | |
| PHA Name: Ponchatoula Housing Authority | | Grant Type and Number Capital Fund Program Grant No: LA048P075501-09 Replacement Housing Factor Grant No: Date of CFFP: | | | | | |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 2) <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost ¹ | | | |
| | | Original | Revised ² | Obligated | Expended | | |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | | | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | | | | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | \$170,600 | \$170,600 | 170,600.00 | 10,490.12 | | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | | | |
| Signature of Executive Director | | Date 04/03/2010 | | Signature of Public Housing Director | | Date | |

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Federal FFY of Grant: 2009[illegible]

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

| | | | | | | | |
|---|--|---|----------------------|---|--------------------------------|---|--|
| Part I: Summary | | | | | | FY of Grant: 2010* FY of Grant Approval: | |
| PHA Name: Ponchatoula Housing Authority | | Grant Type and Number Capital Fund Program Grant No: LA048P075501-10 Replacement Housing Factor Grant No: Date of CFP: | | | | | |
| Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | <input type="checkbox"/> Reserve for Disasters/Emergencies | | <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report | | | |
| Line | Summary by Development Account | Original | Total Estimated Cost | Obligated | Total Actual Cost ¹ | Expended | |
| 1 | Total non-CFP Funds | | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | 5,000.00 | | | | | |
| 3 | 1408 Management Improvements | 25,100.00 | | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 7,000.00 | | | | | |
| 5 | 1411 Audit | | | | | | |
| 6 | 1415 Liquidated Damages | | | | | | |
| 7 | 1430 Fees and Costs | 14,000.00 | | | | | |
| 8 | 1440 Site Acquisition | | | | | | |
| 9 | 1450 Site Improvement | 11,900.00 | | | | | |
| 10 | 1460 Dwelling Structures | 97,600.00 | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 5,000.00 | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | | | |
| 14 | 1485 Demolition | 3,000.00 | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | | |
| 16 | 1495.1 Relocation Costs | 2,000.00 | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | | |

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

| | | | | | |
|---|--|---|--------------------------------------|---|--------------------------------|
| Part I: Summary | | | | FFY of Grant: 2010 FFY of Grant Approval: | |
| PHA Name: Ponchatoula Housing Authority | | Grant Type and Number Capital Fund Program Grant No: LA048P075501-10 Replacement Housing Factor Grant No: Date of CFPP: | | | |
| Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report | | | |
| Line | Summary by Development Account | Total Estimated Cost | Revised ² | Obligated | Total Actual Cost ¹ |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | Original | | | Expended |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 170,600.00 | | | |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |
| Signature of Executive Director | | Date 4/3/2010 | Signature of Public Housing Director | | |
| | | | Date | | |

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

[illegible]

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Federal FY of Grant: 2010

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

| | | | | | | | |
|---|--|--|----------------------|--|------------|--|----------|
| Part I: Summary | | PHA Name: Ponchatoula Housing Authority | | Grant Type and Number Capital Fund Program Grant No: LA48P07550107 Replacement Housing Factor Grant No: Date of CFFP: | | FFY of Grant: 2007 FFY of Grant Approval: | |
| <input type="checkbox"/> Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2008 | | | | <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:2) <input type="checkbox"/> Final Performance and Evaluation Report | | | |
| Line | Summary by Development Account | Original | Total Estimated Cost | Revised ² | Obligated | Total Actual Cost ¹ | Expended |
| 1 | Total non-CFP Funds | | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | 113,510.00 | 16,216.00 | | 16,216.00 | 16,216.00 | |
| 3 | 1408 Management Improvements | 32,432.00 | 32,432.00 | | 32,432.00 | 17,978.67 | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 16,216.00 | | | | | |
| 5 | 1411 Audit | | | | | | |
| 6 | 1415 Liquidated Damages | | | | | | |
| 7 | 1430 Fees and Costs | | 12,150.00 | | 12,150.00 | 11,215.00 | |
| 8 | 1440 Site Acquisition | | | | | | |
| 9 | 1450 Site Improvement | | | | | | |
| 10 | 1460 Dwelling Structures | | 101,360.00 | | 101,360.00 | 101,360.00 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | | | |
| 14 | 1485 Demolition | | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | | |

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

| | | | | | | | |
|---|--|---|----------------------|--------------------------------------|------------|---------------------------|--|
| Part I: Summary | | | | | | FFY of Grant: 2007 | |
| PHA Name: Ponchartroula Housing Authority | | Grant Type and Number Capital Fund Program Grant No: LA48P07550107 Replacement Housing Factor Grant No: Date of CFP: | | | | FFY of Grant Approval: | |
| <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2008 | | <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost ¹ | | | |
| | | Original | Revised ² | Obligated | Expended | | |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | | | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | | | | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 162,158.00 | 162,158.00 | 162,158.00 | 146,769.67 | | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | | | |
| Signature of Executive Director | | Date 04/03/2010 | | Signature of Public Housing Director | | Date | |

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PHA Name: Ponchatoula Housing Authority

Grant Type and Number

Federal RY of Grant: 2007

CFRP (Yes/ No):
Replacement Housing Factor Grant No:

[illegible]

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²To be completed for the Performance and Evaluation Report.

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Federal FY of Grant: 2007[illegible]

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